PTO/SB/06 (07-06)

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THE DETERMINATION RECORD						Applica	Application or Docket Number			ling Date	To be Mailed
┝	Substitute for Form PTO-875						10/577983			•	10 be Maried
	A	<b>NPPLICAT</b>	ION AS FIL	ED - PART I					OT	HER THAN	
					(Column 2)	S	MALL	ENTITY 🛛	OR	SMA	ALL ENTITY
$\vdash$	FOR BASIC FEE		NUMBER	FILED N	UMBER EXTRA	RA	TE (\$)	FEE (\$)		HATE (\$)	FEE (\$)
_	(37 CFR 1.16(a), (b	), or (c))	N/A		N/A		V/A		1	N/A	
L	SEARCH FEE (37 CFR 1 16(k), (i)	). or (m))	N/A		N/A		V/A		1	N/A	
L	EXAMINATION F (37 CFR 1 16(o), (p)	EE ), or (q))	N/A		N/A		V/A			N/A	
(37	TAL CLAIMS CFR 1 16(i))		· m	inus 20 -	<del>" , </del>	× s	=	<u> </u>	OR	× \$	
(37	DEPENDENT CLAI CFR 1 16(h))	MS	minus 3 _			× s			1	x \$ =	
	APPLICATION SIZ (37 CFH 1 16(s))		If the specification and drawin sheets of paper, the applicatio is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37		ion size fee due  ') for each on thereof, See						
. !!	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										
	the difference in column 1 is less than zero, enter "0" in column 2					TC	DTAL		]	TOTAL	
	(Column 1) (Column 2) (Column 3)						SMAL	L ENTITY	OR		ER THAN . ALL ENTITY
AMENDMENT	1/7/10	REMAINI AFTER AMENDA	-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA <sup>*</sup>	TE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	1 16(i)) Independent	9.3	Minus	- 93	-0	X \$	æ	0	OR	× \$ =	
	(97 CFR 1 16(h))	· 3	Minus	··· 3	. O	X \$		0	OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR		
						TO: ADI FEE	D.Γ	0	OR	TOTAL ADD'L FEE	
		(Column		(Column 2)	(Column 3)				_		
느		CLAIM REMAIN AFTFI AMENDM	ING R	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA <sup>*</sup>	TE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1 160)	•	Minus	**	v	X \$			OR	x \$ =	
	Independent (37 CFR + 16(b))	·	Minus	+4.	_	X \$	=		OR	Х\$ <del>-</del>	
	Application S	Size Fee (37 (	CFR 1 16(s))								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 160))								OR		
17.	If the entry in column 1 is less than the entry in column 2, write "0" in column 3						TAL D'L		OR	TOTAL ADD L FEE	
	the "Highest Num the "Highest Num	ber Previously ber Previousl	Paid For" IN T y Paid For" IN	HIS SPACE is less THIS SPACE is les	o column 3 s than 20 enter "20" s than 3 enter "3" ne highest number f	/N	ERIL'	nstrument Ex YN WATTS/		er:	· -

This collection of information is required by 37 CFR 1 16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1 14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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